FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12^h, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

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CMMITTEE NAME	Must be same as	on Statement of Orga	nization)		FORM	
Committee to Elec	ct Patti Fields				DR-2	DISCLOSURE
MPORTANT: Indicate 1)Statewide/Legislef 4)County Central Co Subdivision Candidate 11) Local Ballot Issue	e by # type of committ tive/Judge Standing for pmmittee (5)County (a (8)County PAC (9 e	ee you are reporting for. or Retention Candidate (Candidate (6) City Candi O) City PAC (10) School	7 2)State PAC (3)State Party date (7)School Board or Othe Board or Other Political SubdM	er Political Islon PAC (
CANDIDATE COM Candidate Name Patti Fields	MITTEES ONLY:		Political Party (if appl	licable)	Scanned	
Office Spught	Board		District (if Senate or I			didate for a
ate reports are subject and date's committee	ect to possible civil a se, and the chairpers ERSON FILING RE	×	committee, is the individual notations		g timely and accu	
	THE RESERVE THE PERSON NAMED IN	no Election	REPORT FOR (1) E	LECTION /(2)NO	N-ELECTION Y	EAR.
AM FILING A			In	ndicate by #		
	(report det				Committees, enter	Date of Election
		ORT DATED <u>09/07/2</u>		Scote	mber 13, 2011	
			CD: Intian Farm DP 3	Count	& Local Committe	es, enter County in
Check if this is (You must	final (termination) re st continue to file re	eport and attach Notice eports until a DR-3 is fil	e of Dissolution Form DR-3. ed.)	which	Election is held	
Check if this is (You mu	st continue to file le	sports until a DI (o 12 11		which		
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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE (Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Committee To Elect Patti Fields

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
08/29/11	ID# CK#	Willard Boyd 720 River Street Iowa City, IA		\$50.00	
08/31/11	ID# CK#	Dorothy Ray 1851 Melrose Ave #102 Iowa City, IA		25.00	
	ID# CK#				
	ID#				
	1D#				
	CK#				
	CK#				
	CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	\$ 75.00	
		TOTAL (if last page o	f this schedule)	s 75.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of 1 (for Schedule A) FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
(Rev. 07/03)	MONETARY EXPENDITURES
CHEC	K THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

AMOUNT PURPOSE NAME AND ADDRESS TO WHOM CANDIDATE (DESCRIBE TRANSACTION) EXPENDED EXPENDITURE ID NUMBER DATE (Disbursement) WAS MADE EXPENDED (if applicable) AND PAC (MM/DD/YR) CHECK NUMBER ID# Bank Fee MidWestOne Bank \$ 5.35 Iowa City, IA 06/30/11 CK# ID# Bank Fee MidWestOne Bank 5.35 Iowa City, IA 07/31/11 CK# ID# CK# ID# CK# ID# CK# 1D# CK# ID# CK# ID# CK# SUB-TOTAL \$ 10.70 TOTAL (if last page of this schedule) \$ 10.70

THIC	POY	ADDLI	ES TO	CANDIDATES'	COMMITTEES	ONLY:
IMIS	BUX	APPLI	ES IV	CANDIDATES	C CAMMAN I I EEO	CHELL

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. {Refer to Schedule G instructions and lowa Code 68A.402(3)(I).)

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(for Schedule B)